

FEC FORM 2
STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) TERRI LYNN LAND			2. Candidate's FEC Identification Number S4MI00363	
(b) Address (number and street) 7955 BYRON STATION CT SW		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code BRYON CENTER MI 49315		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate	6. State & District of Candidate MI 00		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) TERRI LYNN LAND FOR SENATE		
(b) Address (number and street) PO BOX 308		
(c) City, State, and ZIP Code GRANDVILLE MI 49418		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) LEGACY VICTORY COMMITTEE		
(b) Address (number and street) 901 N. WASHINGTON STREET SUITE 700		
(c) City, State, and ZIP Code ALEXANDRIA VA 22314		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate TERRI LYNN LAND	Date 04/22/2014
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

DESIGNATION OF OTHER AUTHORIZED COMMITTEES [ADDITIONAL]
(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)
2014 SENATORS CLASSIC COMMITTEE

(b) Address (number and street)
228 S. WASHINGTON STREET
SUITE 115

(c) City, State and ZIP Code
ALEXANDRIA VA 22314

DESIGNATION OF OTHER AUTHORIZED COMMITTEES [ADDITIONAL]
(Including Joint Fundraising Representatives)

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NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

DESIGNATION OF OTHER AUTHORIZED COMMITTEES [ADDITIONAL]
(Including Joint Fundraising Representatives)

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NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

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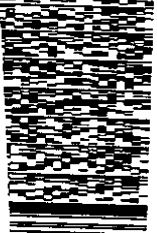
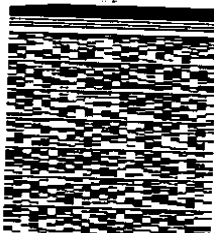


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SECRETARY

DANA K. MCALLUM
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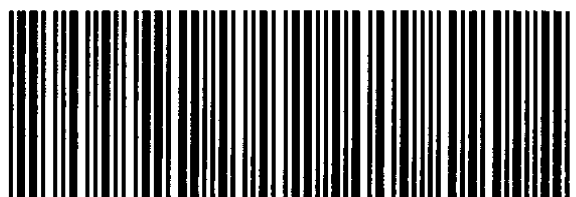
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